COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHDE020193 US

As a below named inventor, I he	ereby declare that:						
My residence, post office addre	ss and citizenship are as state	ed next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Device for generating radiation the specification of which (check only one item below):							
is attached hereto.	is attached hereto.						
was filed as United States a	pplication						
Serial No							
on —————							
and was amended							
on							
★ was filed as PCT internation	al application						
DCT / TDO2 / 0.26	• •						
Number PCT/IB03/036		<u> </u>					
on <u>14.08.2003</u>							
and was amended under PCT Article 19							
on			(if applicable).				
I hereby state that I have review claims, as amended by any amended by a ame		nts of the above-identified specificat	ion, including the				
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).							
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United							
States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:							
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:							
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119				
Germany	102 38 399.5	22 August 2002	YES				
		DEPARTMENT OF COMMERCE Poter	A and Trademade Office				

Combined Declaration For Patent Application and Power of Attorney (Confinctudes Reference to PCT International Applications)					ed) Attorneys Docket Number PHDE020193 US		
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)							
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245			Direct Telephone Calls to: (name and telephone number) (914)332-0222		phone number)		
100	FULL NAME OF INVENTOR	FAMILY NAME JÜSTEL		FIRST GIVEN NAME Thomas		SECOND GIVEN NAME	
201	RESIDENCE & CITIZENSHIP	Aachen DE	; Y	STATE OR FOREIGN COUR Germany	NTRY	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRI Augustastr. 78		52070 Aachen		STATE & ZIP CODE/COUNTRY Germany	
200	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME Walter		SECOND GIVEN NAME	
202	RESIDENCE & CITIZENSHIP	CITY Alsdorf	DEV	STATE OR FOREIGN COUR Germany	VTRY	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRI Saarstr. 115	ESS	CITY 52477 Alsdorf		STATE & ZIP CODE/COUNTRY Germany	
300	FULL NAME OF INVENTOR	FAMILY NAME SCHMIDT		FIRST GIVEN NAME Peter		J.	
203	RESIDENCE & CITIZENSHIP	Aachen DEV		STATE OR FOREIGN COUNTRY Germany		COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRI Südstr. 62	ESS	CITY 52064 Aachen		STATE & ZIP CODE/COUNTRY Germany	
	FULL NAME OF INVENTOR	FAMILY NAME BLANKEFORT		FIRST GIVEN NAME Helmut		SECOND GIVEN NAME	
204	RESIDENCE & CITIZENSHIP	CITY Lathen		STATE OR FOREIGN COUNTRY Germany		Germany	
•	POST OFFICE ADDRESS	POST OFFICE ADDR	ESS	CITY 49762 Lathen		STATE & ZIP CODE/COUNTRY Germany	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.							
SIGNA	ATURE OF INVENT	OR 201	. ,	FINVENTOR 202	SIGNATI	JRE OF INVENTOR 203	
DATE	14.09.2003		DATE	9.2003	DATE 20	0.09.2003	
SIGN	ATURE OF INVENT	Ö R 204					

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DATE

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)					Attorneys Docket Number PHDE020193 US		
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, ,	FULL NAME OF INVENTOR	FAMILY NAME MAYR		FIRST GIVEN NAME Walter		SECOND GIVEN NAME	
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	ADDRESS	Saarstr. 115	ESS .	52477 Alsdorf		STATE & ZIP CODE/COUNTRY Germany	
	FULL NAME OF INVENTOR	FAMILY NAME SCHMIDT		Peter		J.	
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d.	POST OFFICE ADDRESS	POST OFFICE ADDR Vitusstr. 7	ESS	49762 Lathen		STATE & ZIP CODE/COUNTRY Germany	
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SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATU	SIGNATURE OF INVENTOR 203		
DATE DA		DATE	TE DATE				
SIGNATURE OF INVENTOR 204							
Holman Blankelon							
DATE	23.09.2003			II S DEDARTA	AENT OF COM	MEDOE DALLES TO SE	

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(July 1994)

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